

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form

PLAINTIFF UNITED STATES OF AMERICA	COURT CASE NUMBER 3:07 cv 813-MHT
DEFENDANT ONE REMINGTON RIFLE and ONE MARLIN RIFLE	TYPE OF PROCESS COMPLAINT, NOTICE & WARRANT

SERVE
↓
AT

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

ONE MARLIN RIFLE, MODEL 120, .22 CALIBER, BEARING SERIAL NUMBER 27367587

.ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code)

c/o ATF, 2 North Jackson Street, Suite 404, Montgomery, Alabama 36104

SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW:

Number of process to be served
on this Form - 285**3**

John T. Harmon
United States Attorney's Office
Assistant United States Attorney
Post Office Box 197
Montgomery, Alabama 36101-0197

RETURNED AND FILEDNumber of parties to be served
in this case

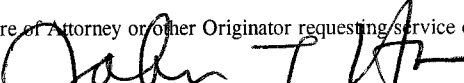
Check for service on U.S.A.

NOV 21 2007

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Address, All
Telephone Numbers, and Estimated Times Available For Service)

AGENCY # 776045-07-0115

CLERK
**U. S. DISTRICT COURT
MIDDLE DIST. OF ALA.**

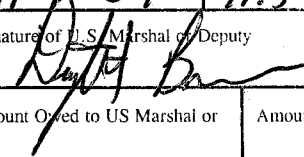
Signature of Attorney or other Originator requesting service on behalf of : 	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER (334) 223-7280	DATE 09/10/07
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process No. _____	District of Origin No. _____	District to Serve No. _____	Signature of Authorized USMS Deputy or Clerk _____	Date _____
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I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc. at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below).

Name and title of individual served (If not shown above).				<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.		
Address (complete only if different than shown above)				Date of Service 11-9-07	Time 11:50 am	
				Signature of U.S. Marshal or Deputy 		
Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount Owed to US Marshal or	Amount or Refund

REMARKS: